Rec'd PCT/PTO 21 NOV 2005

	COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications) ATTORNEY'S DOCKET STOLMAR-0							
As a below nam	ned inventor, I hereby de	clare that:		x				
My reside	nce, post office address	and citizenship are as stated	below next t	o my name.	;			
				elow) or an original, first and join th a patent is sought on the inver				
METHOD	OF MANUFACTURIN	IG LABELLED OLIGONUC	CLEOTIDE (CONJUGATES				
the specif	ication of which (check	only one item below):						
	is attached hereto.							
	was filed as United States application							
	Serial No							
	on							
	and was amended							
	on (if applicable).							
\boxtimes	was filed as PCT interr	ational application			·I			
	Number PCT/EP2003/	011354						
	on October 14, 2003,							
	and was amended unde	r PCT Article 19						
	on (if applicable	r).						
	tate that I have reviewed by any amendment refer		s of the abov	ve-identified specification, inclu	ding the claims, as			
continuati	on-in-part applications, r		ecame availal	tability as defined in 37 CFR § ble between the filing date of the p lication.				
inventor's country ot application	or plant breeder's rights her than the United State n for patent, inventor's or	certificate(s), or 365(a) of a es of America, listed below a	ny PCT inte nd have also cate(s), or an	or 365(b) of any foreign applicational application which desidentified below, by checking the PCT international application is	gnated at least one le box, any foreign			
PRIOR FOREIGN	APPLICATION NUMBER(S)	COUNTRY		FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED			
10247790.6		Germany		10/14/2002				
								
· 								
POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorneys and agents at Millen, White, Zelano & Branigan, PC that are associated with Customer Number 23599 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.								
Send Correspo	ndence to:Customer No. 2	23599 Telepho 703/24	one No. 3-6333	Direct Telephone	Calls to:			

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER STOLMAR-0002

FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME** OF INVENTOR **STENGELE** Klaus Peter 2 0 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE & CITIZENSHIP Pleiskirchen Germany 1 Germany STREET CITY POST OFFICE STATE & ZIP CODE/COUNTRY Eichenweg 17 **ADDRESS** Pleiskirchen 84568, Germany **FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME** OF INVENTOR KVASSIOUK Evgueni 0 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & 4 2 CITIZENSHIP Waldkraiburg Germany Germany STREET STATE & ZIP CODE/COUNTRY CITY POST OFFICE Metznerstrasse 3 84478, Germany Waldkraiburg ADDRESS FIRST GIVEN NAME SECOND GIVEN NAME **FAMILY NAME FULL NAME** OF INVENTOR 2 STATE OR FOREIGN COUNTRY 0 CITY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP 3 CITY STATE & ZIP CODE/COUNTRY STREET POST OFFICE **ADDRESS FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF INVENTOR 2 0 CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP STATE & ZIP CODE/COUNTRY STREET POST OFFICE ADDRESS **FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME** OF INVENTOR 2 n STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & 5 CITIZENSHIP STREET STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME** OF INVENTOR 2 CITY 0 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP 6 STREET CITY STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS **FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME** OF INVENTOR 2 0 RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP STREET CITY STATE & ZIP CODE/COUNTRY POST OFFICE **ADDRESS**

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER STOLMAR-0002

2	FULL NAME FAMILY NAME OF INVENTOR		FIRST GIVEN NAME	SECOND GIVEN NAME	
0 8	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
2 1 1	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СІТҮ	STATE & ZIP CODE/COUNTRY	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE DE LA ZA	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INTENTOR 202	DATE April 19.2	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE